

# GEORGIA REGIONAL HOSPITAL AT ATLANTA

**Protocol: Monitoring of Individuals Bowel Movements**

**Purpose: To establish guidelines for monitoring of individuals bowel movements**

**Procedures:**

1. All individuals will be maintained on daily monitoring of bowel functions.
2. Nursing goals and objectives will be incorporated into the Individualized Recovery Plan for all newly admitted individuals meeting one or more of the following criteria.
  - a. Individuals with a history of constipation
  - b. Individuals who have experienced severe constipation from medications known to cause constipation.
  - c. Individuals with Developmental Disabilities and/or impaired communication.

<b>ACTION</b>	<b>RATIONALE</b>
<ol style="list-style-type: none"><li>1. At the time the registered nurse completes the nursing assessment, the nurse will initiate the Bowel Movement Record and will:<ol style="list-style-type: none"><li>a. Inform the staff that the form has been initiated.</li><li>b. Inform the individual that the form has been initiated.</li><li>c. Inform staff that they must obtain information from the individual about his or her bowel movement each shift. If the individual is developmentally disabled or has impaired communication, the staff must accompany individual when toileting.</li><li>d. This form is maintained in the individual's medical record and a new one started at the beginning of each month.</li><li>e. Request a dietary consult.</li></ol></li></ol>	<ol style="list-style-type: none"><li>1. Ensure tracking of the individual's bowel movement and staff documentation individual bowel movement. (See attachment)<ol style="list-style-type: none"><li>e. Foods high in fiber should be added to diet. Snacks should include fruits such as apples to prevent and/or aid in the relief of constipation</li></ol></li></ol>

<p>2. The Nurse in Charge will assign Technicians to be responsible for asking each individual about his or her bowel functions. The name of the Technicians responsible for this task will be documented on the Staff Assignment Sheet each day and shift.</p> <p>3. Nursing staff will encourage individuals to increase fluid intake and activity when possible. They should encourage individual to limit all drinks, which contain caffeine.</p> <p>4. The medication nurse(s) will be responsible for monitoring each individual's Bowel Movement Record each shift to ensure that bowel functions are recorded on the form. This assignment must be entered on the Staff Assignment sheet.</p> <p>5. If the medication nurse(s) finds that an individual has no bowel movement or no bowel movement recorded for 3 days, the nurse will:</p> <ul style="list-style-type: none"> <li>a. Increase fluids and consult M.D. if there are no orders.</li> <li>b. Complete an examination of the abdomen to determine presence of distention and bowel sounds in all 4 quadrants (Look, Listen, and Feel). The findings of this examination must be documented in the individual's progress notes and reported to the MD.</li> </ul> <p>6. The medication nurse will administer suppositories and/or medication ordered by the physician and will:</p> <ul style="list-style-type: none"> <li>a. Record results on the MAR and</li> </ul>	<p>2. Establish direct care staff accountability for monitoring, documenting and reporting individual's bowel movements.</p> <p>3. To promote regularity of bowel movements and normal bowel functions. To establish accountability for monitoring bowel functions.</p> <ul style="list-style-type: none"> <li>a. Increased fluid intake and activity helps to relieve not only the constipation itself but also its cause.</li> <li>b. Caffeine has a diuretic affect and will lead to further problems with constipation.</li> </ul> <p>4. To establish License staff accountability for monitoring bowel functions. Any delay in communication and nursing interventions may lead to an adverse event.</p> <p>5. To avoid possible constipation, obstruction and associated complications. To ensure continuity of care 24 hours. It is important that results are obtained to ensure that further complications do not present.</p> <p>6. To avoid possible constipation, obstruction and associated complications. To ensure adequate communication and continuity of care.</p>
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<p>progress notes</p> <ul style="list-style-type: none"> <li>b. Report results to the Nurse-in-Charge</li> <li>c. If medication and /or suppository are given at the end of a shift with no results, the off going nurse will report it to the on-coming shift nurse. The on-coming nurse will monitor and then record the results on the MAR and progress notes.</li> </ul> <p>7. If there is no bowel movement after the above medical and nursing intervention, the nurse will:</p> <ul style="list-style-type: none"> <li>a. Evaluate for abdominal distention</li> <li>b. Evaluate for nausea</li> <li>c. Evaluate for vomiting</li> <li>d. Document findings and notify M.D. of positive findings.</li> </ul>	<p>7. Understand that many serious clinical problems do not present with localized findings until the course of the problem is well advance; instead, constitutional signs or symptoms are present.</p>
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Attachments:

Medications Associated With or Causing Constipation  
Bowel Movement Record

<b>MEDICATIONS ASSOCIATED WITH OR CAUSING CONSTIPATION</b>	
<u>ANTICHOLINERGIC</u>	<u>OPIATE ANALGESICS</u>
<ul style="list-style-type: none"> <li>• Antidepressants               <ul style="list-style-type: none"> <li>-Monoamine oxidase inhibitors</li> <li>-Tricyclic antidepressants</li> </ul> </li> <li>• Antihistamines</li> <li>• Antiparkinsonian</li> <li>• Antipsychotics               <ul style="list-style-type: none"> <li>-Phenothiazines</li> </ul> </li> </ul>	<u>MISCELLANEOUS</u>
<u>ANTICONVULSANTS</u>	<ul style="list-style-type: none"> <li>- Aluminum antacids</li> <li>- Calcium (antacids, supplements)</li> <li>- Cholestyramine</li> <li>- Ferrous sulfate</li> <li>- Sucralfate</li> <li>- Vinca alkaloids</li> </ul>
<u>ANTIHYPERTENSIVES</u>	
<ul style="list-style-type: none"> <li>• B-blockers</li> <li>• Calcium channel blockers</li> <li>• Clonidine</li> <li>• Diuretics</li> </ul>	

